

# Rutgers Cooperative Extension, NJ EFNEP Adult Cover Sheet

## Final Packet (-2)

COUNTY				ADULT
<input type="checkbox"/> ENGLISH <input type="checkbox"/> SPANISH <input type="checkbox"/> BOTH				
<b>NUTRITION EDUCATOR ONLY: GROUP INFORMATION</b>				
Nutrition Educator Name				
Site/Name		City		
Site Description				
Volunteer Name		Group Number (Assigned by the Secretary)	-2	
Group Start Date		Group End Date		
Final # of Participants		Total # of Lessons		
Total # of Graduates		Total # of Sessions		
Total # of Dropped		Total # of Hours Taught		
Date Submitted to Secretary		Educator's Signature		
<b>MANDATORY FORMS</b>				
Please initial to confirm all forms are complete & have been included in this packet.				
Educator		Secretary		Supervisor
<input type="checkbox"/> Site Issue Forms (if needed) <input type="checkbox"/> Volunteer Registration Forms <input type="checkbox"/> Attendance Summary Sheets <input type="checkbox"/> Sign-In Sheets <input type="checkbox"/> Exit FPAQs		<input type="checkbox"/> Exit Diet Recalls <input type="checkbox"/> Drop Forms (if needed) <input type="checkbox"/> Participant Drops <input type="checkbox"/> Tally Sheet <input type="checkbox"/> Lesson Plan		
<b>SECRETARY ONLY</b>				
Date Reviewed		Secretary Signature:		
Date Scanned				
<b>SUPERVISOR ONLY</b>				
Date Reviewed		Supervisor Signature:		

<b>STATE OFFICE</b>				
Date Received		Received By		<input type="checkbox"/> Electronic/Digital